

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
101650726
APPLICANT(S)

8/16/06

CLAIMS

AS FILED		AFTER		AFTER	
		CLAM		AMENDMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.
1					
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49					
50					
TOTAL IND.			2		
TOTAL DEP.			5		
TOTAL CLAIMS			7		

IND.	DEP.	IND.	DEP.	IND.	DEP.
51					
52					
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TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					